

COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC WORKS

"To Enrich Lives Through Effective and Caring Service"

Memo of Review For Correctness and Completion

The attached FEMA Elevation Certificate has been reviewed by this office. The items noted below are not correct on the attached form and should read as entered on this page.

		SECTI	ON A - PROPERTY INFORMA	ATION	For Insurance Company Use:	
A1. Building Owner's Name Jack Tuszynski					Policy Number	
A2. Building Street Addres 49740 259th Street West).	Company NAIC Number				
City Neenach State	CA ZIP Code	93536				
A3. Property Description (L Tract No. 27072 Lot 8 API		mbers, Tax Parcel Nu	mber, Legal Description, etc.)			
A4. Building Use (e.g., Res A5. Latitude/Longitude: Lat A6. Attach at least 2 photo A7. Building Diagram Num A8. For a building with a cr a) Square footage of b) No. of permanent fr enclosure(s) within c) Total net area of flod d) Engineered flood of	t Long. graphs of the build ber awlspace or encorawlspace or enclood openings in 1.0 foot above a bod openings in 1.0 foot above a	Horiz Iding if the Certificate losure(s): closure(s) _ the crawlspace or djacent grade	ontal Datum: NAD 1927 Sis being used to obtain flood insurance A9. For a b A9. For a b Square b) No. with Square sq in c) Tot	ance. uilding with an attac uare footage of attac	ched garage sq ft openings in the attached garage djacent grade openings in A9.b sq in	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name Los Angeles County 06504		umber E	2. County Name		B3. State	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)	
☐ FIS Profile B11. Indicate elevation datu	☐ FIRM m used for BFE i in a Coastal Barr	☐ Community Detern Item B9: ☐ NGVD) Other (Describe	e)	
Local Official's Name Geo	rgo Do La O		Title Senior Ci	il Engineer		
			Title Senior Civ			
Community Name Los Ang	eles County		Telephone (62	26) 458-7155		
Signature	on Lan		Date / 2 /	10/15		
Comments Section E. E5 is	N/A			,		

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1–9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION					FOR INSURANCE COMPANY USE		
A1. Building Owner's Name Jack Tuszynski							
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 49740 259th St. West					mber:		
City Neenach State CA ZIP Code 93536					3		
A3. Property Description (Lot and Block Numbers, Tax Parce Tract No. 27072 Lot 8 APN 3277-024-003							
A4. Building Use (e.g., Residential, Non-Residential, Addition A5. Latitude/Longitude: Lat. 34.6981686 A6. Attach at least 2 photographs of the building if the Cert A7. Building Diagram Number 1B A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b d) Engineered flood openings? ☐ Yes ☒ No SECTION B − FLOOD B1. NFIP Community Name & Community Number 065043 B4. Map/Panel Number B5. Suffix B6. FIRM Index 106037C0100 F 09/26/200 B10. Indicate the source of the Base Flood Elevation (BFE) data	Long118.39 ificate is being used O S N/A O S D INSURANCE R B2. Count Los Ang Date B7. FIRM Revis. 08	A9. For a q ft a) S b) N w q in c) To d) E ATE MAP (FIR y Name eles Panel Effective/ed Date //26/2008	building with an atta iquare footage of atta lumber of permanent vithin 1.0 foot above otal net area of flood ingineered flood ope RM) INFORMATIO	ached garage t flood openings adjacent grade t openings in A9 nings? Ye N B: C D B9. Base Flo	O sq ft in the attached garage -N/A b O sq in		
☐ FIS Profile ☐ FIRM ☐ Community Determined B11. Indicate elevation datum used for BFE in Item B9: ☐ B12. Is the building located in a Coastal Barrier Resources Sy Designation Date: / / ☐ CBR	☐ Other/Source ☐ NGVD 1929 ystem (CBRS) area S ☐ OPA	: <u>N/A</u> ☐ NAVD 1988 or Otherwise Prot	☐ Other/Source: ected Area (OPA)?	☐ Yes 🔀 N	0		
SECTION C – BUILDIN		<u> </u>					
 C1. Building elevations are based on: ☐ Construction *A new Elevation Certificate will be required when const C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1 C2.a–h below according to the building diagram specifie 	ruction of the buildi -V30, V (with BFE), d in Item A7. In Pue	AR, AR/A, AR/AE erto Rico only, ent	, AR/A1–A30, AR/AF er meters.	☑ Finished Cons			
Benchmark Utilized: N/A Indicate elevation datum used for the elevations in item		ertical Datum: <u>N</u>		Othor/Source			
Datum used for building elevations must be the same as		BFE.		asurement used			
a) Top of bottom floor (including basement, crawlspace,	or enclosure floor)	N/A	feet	meters			
b) Top of the next higher floor	Zonos only)	N/A	feet	☐ meters			
c) Bottom of the lowest horizontal structural member (Vd) Attached garage (top of slab)	Zones only)	N/A	feet feet	☐ meters ☐ meters			
 e) Lowest elevation of machinery or equipment servicing (Describe type of equipment and location in Commen 	ts)	N/A	feet	meters			
f) Lowest adjacent (finished) grade next to building (LAC	•	N/A N/A	=	meters			
 g) Highest adjacent (finished) grade next to building (HA h) Lowest adjacent grade at lowest elevation of deck or structural support 	•	N/A	feet feet	☐ meters ☐ meters			
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION							
This certification is to be signed and sealed by a land surveyor information. I certify that the information on this Certificate repr	, engineer, or archite esents my best effo	ect authorized by rts to interpret the	law to certify elevati e data available.				
 ✓ Check here if comments are provided on back of form. ✓ Check here if attachments. 	Were latitude and l licensed land surve	ongitude in Section	•	1/4	JAM J. CHAILLE		
Certifier's Name William J. Challman		License N C61872		REGIS	SPLACE 32 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		
Title Principal	Company Name Challman Engin	eering		\ *	\ \EXEP\0\\(\frac{1}{20!\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
Address 41747 11th Street W, Suite D	City Palmdale	State	ZIP Code 93551	1/2	CIVIL		
Signature	Date 12/09/2015	Telephone (661) 52			E OF CALIFOR		

ELEVATION CERTIFICATE, page 2

IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOI	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No.				Policy Number:				
49740 259th St. West								
City Neenach	State CA	ZIP Code 93536		Cor	npany NAIC Nun	nber:		
	SURVEYOR, ENGINEER, OR A		RTIFICATIO	N (CONT	INUED)			
Copy both sides of this Elevation Certificate f								
Comments Electric panel is located on fro	ont of house over 4 feet above	grade						
Water heater is located in bac	ck of house over 4 feet above							
HVAC is located in back of ho	ouse over 4 feet above grade							
Signature /	ll _	Date 12/09/20)15					
SECTION E – BUILDING ELEVATIO	N INFORMATION (SURVEY N	OT REQUIRED)	FOR ZON	E AO AN	D ZONE A (WITHOUT BFE)		
For Zones AO and A (without BFE), complete It For Items E1–E4, use natural grade, if availab	ems E1-E5. If the Certificate is in	tended to support	a LOMA or L	LOMR-F req				
E1. Provide elevation information for the follow grade (HAG) and the lowest adjacent grade	ving and check the appropriate bo				ve or below th	e highest adjacent		
a) Top of bottom floor (including basemen		<u>4</u> . <u>0</u> 4.2	⊠ feet □	_		below the HAG.		
b) Top of bottom floor (including basemen			⊠ feet □			☐ below the LAG.		
E2. For Building Diagrams 6–9 with permanenthe the next higher floor (elevation C2.b in the		n A Items & and/ _N/A	or 9 (see pag ☐ feet ☐			below the HAG.		
E3. Attached garage (top of slab) is		N/A	feet [_		below the HAG.		
E4. Top of platform of machinery and/or equip	ment servicing the building is _	<u>4</u> . <u>0</u>	⊠ feet □	meters	above or	below the HAG.		
E5. Zone AO only: If no flood depth number is ordinance? ☐ Yes ☐ No ☒ Unknow	available, is the top of the bottom n. The local official must certify thi			vith the cor	mmunity's floo	dplain management		
SECTION F - P	ROPERTY OWNER (OR OWN	ER'S REPRESE	NTATIVE)	CERTIFIC	CATION			
The property owner or owner's authorized repr Zone AO must sign here. The statements in S	esentative who completes Section ections A, B, and E are correct to	s A, B, and E for Z the best of my kno	one A (withowledge)	out a FEMA	issued or con	nmunity-issued BFE) or		
Property Owner or Owner's Authorized Represe								
Addrace		^{City} Palmdale		State C	ZIP Co	ode 93551		
Signature A 1997 (1997)	P 1	D. t.		Telepho				
		12/09/20	115		one (661) 52	4-0911		
Comments NONE								
Jack Tigge	· 12/9/2015	(310)65	8-428	88	Kcheck	here if attachments.		
- V	SECTION G - COMMUNITY I	NFORMATION	(OPTIONAL	L)				
The local official who is authorized by law or ord G of this Elevation Certificate. Complete the ap	linance to administer the communit	y's floodplain man	agement ordi	inance can	complete Sect	tions A, B, C (or E), and		
G1. The information in Section C was tal	•							
who is authorized by law to certify el	evation information. (Indicate the	source and date	of the elevat	tion data ir	the Commer	its area below.)		
G2. A community official completed Sections. The following information (Items G4-	-				ssued BFE) or	Zone AO.		
G4. Permit Number	G5. Date Permit Issued	G6. I	Date Certifica	ate Of Com	pliance/Occu	pancy Issued		
G7. This permit has been issued for:	lew Construction	al Improvement						
G8. Elevation of as-built lowest floor (includin	-			meters				
G9. BFE or (in Zone AO) depth of flooding at i G10.Community's design flood elevation:	ne building site:	* *************************************	☐ feet ☐	meters	Datum	A CONTRACTOR OF THE CONTRACTOR		
				i incleis	Datum			
Local Official's Name		.Title						
Community Name		Telephone						
Signature		Date						
Comments								
					[∡] Check	here if attachments.		

ELEVATION CERTIFICATE, page 3

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

See instructions for iter	_
IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and B $49740\ 259th\ St.$ West	
City State ZIP Cod Neenach CA 93536	de Company NAIC Number:
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 for Item A6. Identify all photographs with date taken; "Front View" and "Re Side View." When applicable, photographs must show the foundation with repindicated in Section A8. If submitting more photographs than will fit on this page.	ear View"; and, if required, "Right Side View" and "Left presentative examples of the flood openings or vents, as

ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS

Continuation Page

IMPORTANT: In these spaces, copy the corre	esponding information from S	ection A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, 949740 259th St. West	Suite, and/or Bldg. No.) or P.O.	Route and Box No.	Policy Number:
City Neenach	State CA	ZIP Code 93536	Company NAIC Number:
If submitting more photographs than wi	II fit on the preceding page, v"; and, if required, "Right s	affix the additional photogous Side View" and "Left Side V	raphs below. Identify all photographs with: /iew." When applicable, photographs must ed in Section A8.



